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** CONTINUING DATA *No m n* *****

** FOREIGN APPLICATIONS *No m m* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 2	TOTAL CLAIMS 30 19	INDEPENDENT CLAIMS 6
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	Initials				

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TITLE

Method and system for providing telecommunication services by a plurality of service providers

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
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